



<p><i>Black Jewels Ladies' Golf Association</i> Membership Application Form</p>			
Application Type			
New Member:		Renew Membership: Member Since: Fiscal Year:	
Contact Information			
Name:		Date:	
Address:			
City:		State:	Zip:
Home Phone:		Other Phone:	
E-mail Address:			
As a member of Black Jewels, you are entitled to the advertised benefits.			
To Waive ALL benefits, check here:			
Other Information			
Level of Play:		Beginner	Intermediate Advanced
Company:		Profession:	
City:		Work Phone:	
<i>This information is collected for event planning purposes.</i>			
Payment Information			
Method of Payment:		Check	Visa MasterCard
Complete Portion Below if paying by Credit Card			
Credit Card Number:		Expiration Date:	
Name as Shown on Credit Card:			
Authorization Signature:		Date:	
Id#:		Clear:	
Process Date:		Referred By:	For Internal Use